## Eppur si muove...

## La terapia nel MONDO LINFOMI

Linfoma diffuso a grandi cellule B: ottimizzazione diagnostica

Stefano A. Pileri



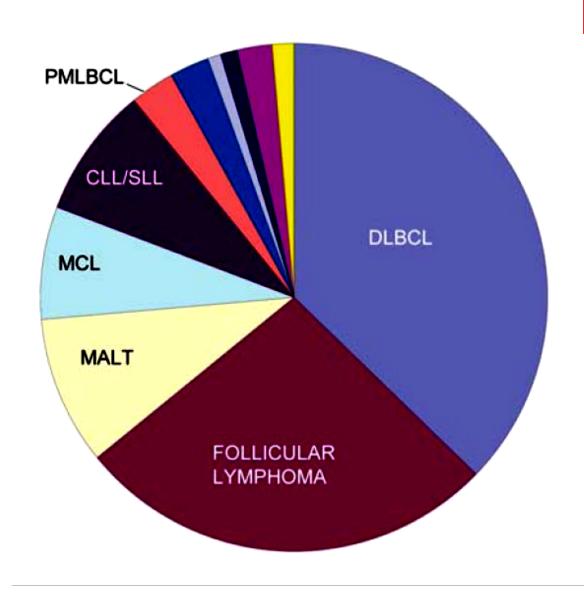




VERONA, 2 MAGGIO 2022

### Disclosures of Stefano A. Pileri

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
BeiGene						х	
Takeda						X	
Roche					х		
Diatech						X	



- Diffuse large B-cell 37%
- Follicular 29%
- MALT lymphoma 9%
- Mantle cell lymphoma 7%
- CLL/SLL 12%
- Primary med large B-cell 3%
- High Grade B, NOS 2.5%
- Burkitt 0.8%
- Splenic marginal zone 0.9%
- Nodal marginal zone 2%
- Lymphoplasmacytic 1.4%

### Diffuse large B-cell lymphoma: variants, subgroups and subtypes/entities

### Diffuse large B-cell lymphoma, noth otherwise specified (NOS)

Common morphologic variants

Centroblastic

**Immunoblastic** 

Anaplastic

Other rare variants

Molecular subgroups

Germinal centre B-cell-like (GCB)

Activated B-cell-like (ABC)

### Diffuse large B-cell lymphoma subtypes

T-cell/histiocyte-rich large B-cell lymphoma

Primary DLBCL of the CNS

Primary cutaneous DLBCL, leg type

**EBV-positive DLBCL, NOS** 

Large B-cell lymphoma with IRF4 rearrangements\*

### Other lymphomas of large B-cells

Primary mediastinal (thymic) large B-cell lymphoma

Intravascular large B-cell lymphoma

DLBCL associated with chronic inflammation

Lymphomatoid granulomatosis

ALK-positive large B-cell lymphoma

Plasmablastic lymphoma

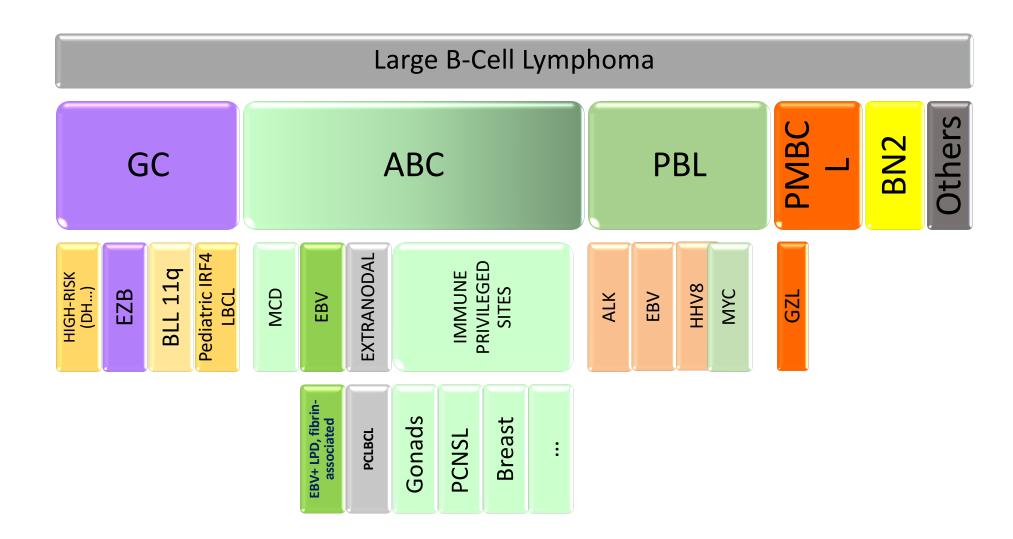
HHV-8-positive DLBCL, NOS

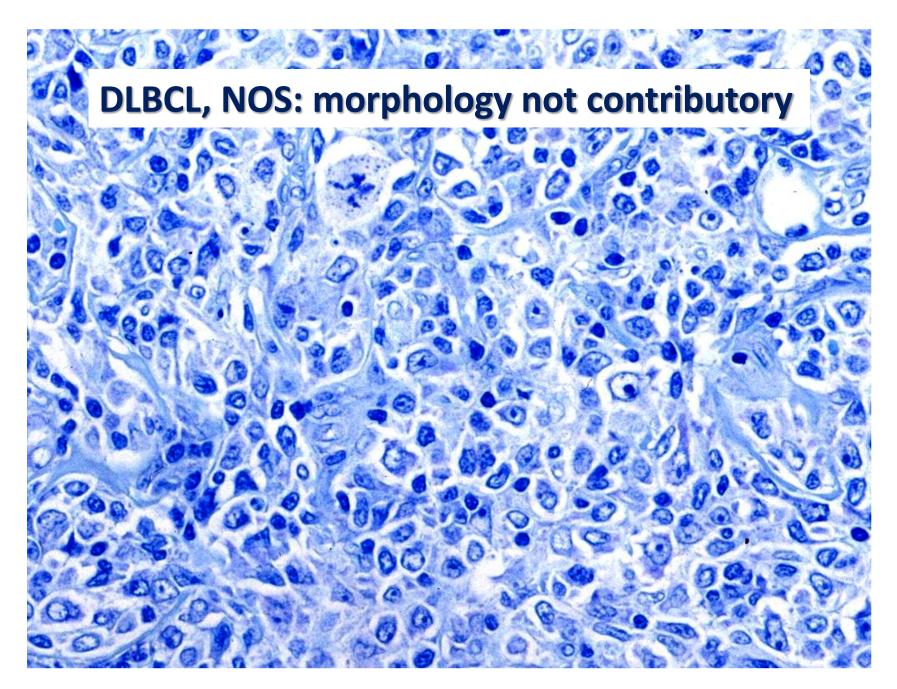
Primary effusion lymphoma

### New provisional categories

High grade B-cell lymphoma

High grade B-cell lymphoma, with BCL2 and/or BCL6 and MYC rearrangements High grade B-cell lymphoma, NOS



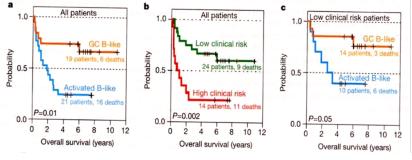


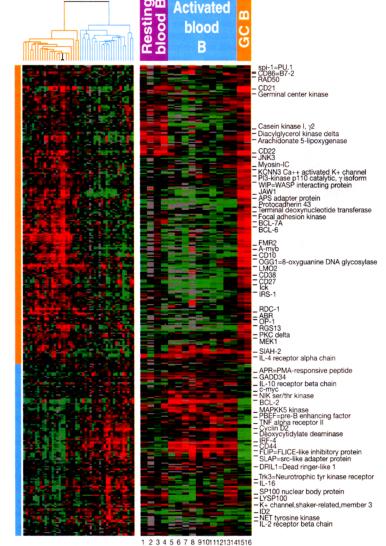
## Front-MIND

### Distinct types of diffuse large B-cell lymphoma identified by gene expression profiling

Alizadeh AA et al.

Nature 2000, 403: 503-11





## **Original limitation:**

need for fresh or frozen tissue, available in only a few patients!

Ideally, tool to apply to FFPE samples!

## Gene-expression profiling and not immunophenotypic algorithms predicts prognosis in patients with diffuse large B-cell lymphoma treated with immunochemotherapy

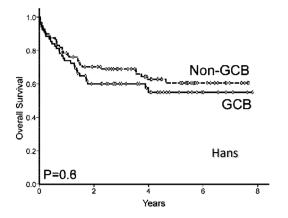
\*Gonzalo Gutiérrez-García,¹ \*Teresa Cardesa-Salzmann,¹ Fina Climent,² Eva González-Barca,² Santiago Mercadal,² José L. Mate,³ Juan M. Sancho,³ Leonor Arenillas,⁴ Sergi Serrano,⁴ Lourdes Escoda,⁵ Salomé Martínez,⁵ Alexandra Valera,¹ Antonio Martínez,¹ Pedro Jares,¹ Magdalena Pinyol,¹ Adriana García-Herrera,¹ Alejandra Martínez-Trillos,¹ Eva Giné,¹ Neus Villamor,¹ Elías Campo,¹ Luis Colomo,¹ and Armando López-Guillermo,¹ for the Grup per l'Estudi dels Limfomes de Catalunya I Balears (GELCAB)

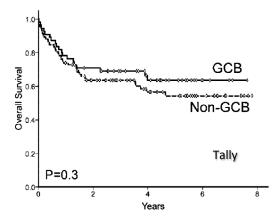
<sup>1</sup>Departments of Hematology and Pathology, Hospital Clínic, University of Barcelona, Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS), Barcelona, Spain; <sup>2</sup>Hospital Duran i Reynals, Hospitalet de Llobregat, Spain; <sup>3</sup>Hospital Germans Trias I Pujol, Badalona, Spain; <sup>4</sup>Hospital del Mar, Barcelona, Spain; and <sup>5</sup>Hospital Joan XXIII, Tarragona, Spain

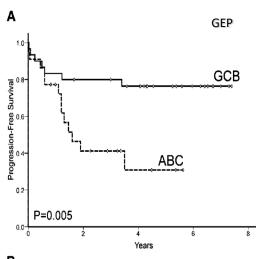
Diffuse large B-cell lymphomas (DLBCLs) can be divided into germinal-center B cell-like (GCB) and activated-B cell-like (ABC) subtypes by gene-expression profiling (GEP), with the latter showing a poorer outcome. Although this classification can be mimicked by different immunostaining algorithms, their reliability is the object of controversy. We constructed tissue microarrays with samples of 157 DLBCL patients homogeneously treated with immunochemotherapy to apply the following algorithms:

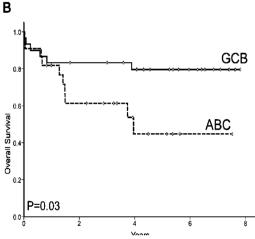
Colomo (MUM1/IRF4, CD10, and BCL6 antigens), Hans (CD10, BCL6, and MUM1/IRF4), Muris (CD10 and MUM1/IRF4 plus BCL2), Choi (GCET1, MUM1/IRF4, CD10, FOXP1, and BCL6), and Tally (CD10, GCET1, MUM1/IRF4, FOXP1, and LMO2). GEP information was available in 62 cases. The proportion of misclassified cases by immunohistochemistry compared with GEP was higher when defining the GCB subset: 41%, 48%, 30%, 60%, and 40% for Colomo, Hans, Muris, Choi,

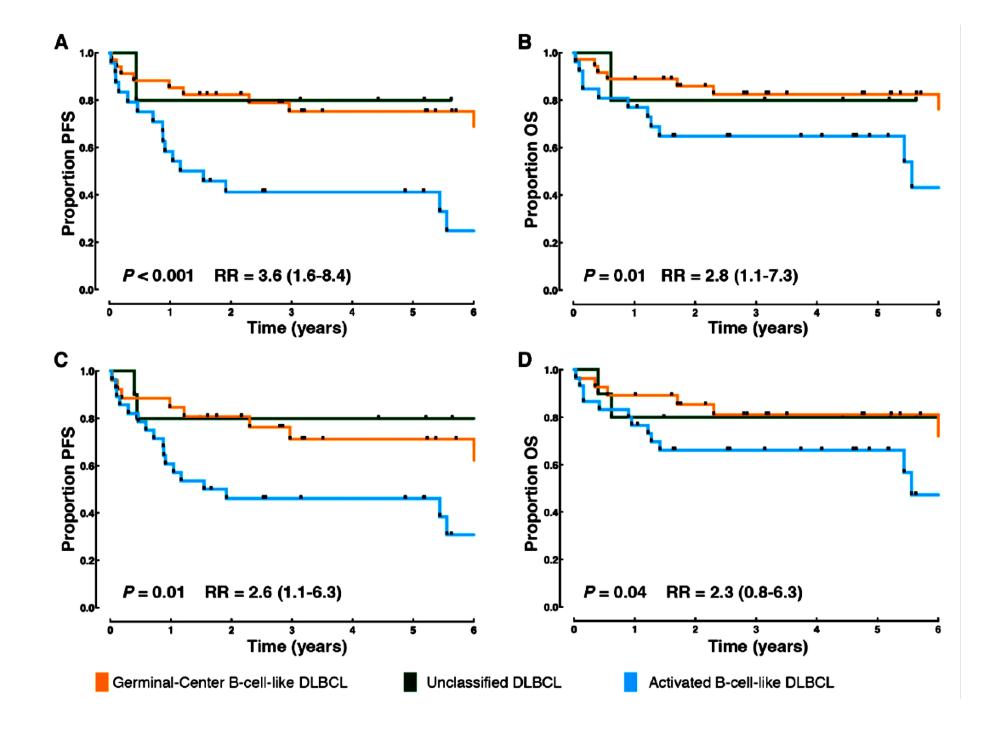
and Tally, respectively. Whereas the GEP groups showed significantly different 5-year progression-free survival (76% vs 31% for GCB and activated DLBCL) and overall survival (80% vs 45%), none of the immunostaining algorithms was able to retain the prognostic impact of the groups (GCB vs non-GCB). In conclusion, stratification based on immunostaining algorithms should be used with caution in guiding therapy, even in clinical trials. (*Blood*. 2011;117(18):4836-4843)











### **Targeted Digital Gene Expression Profiling**

ACTA2

AEBP1

COL1A1

COL1A2

COL4A1

COL5A2

COL6A3

CTHRC1

CTSK

EGR1

FSTL1

GPNMR

LAMB1

MXRA5

PCOLCE

PLOD2

POSTN SPARC

RAB27A

LUM MFAP2 MMP2

BGN

RefSeg NCBI	Gene	Length NCBI	Protein aa	
•		-		
NM_002467.4	MYC	2379	454	
NM_000633.2	BCL2	6492	239	
NM_012452.2	TNFRSF13B	1377	293	
NM_014240.2	LIMD1	6284	676	
NM_001195286.1	IRF4	5329	451	*
NM_194071.3	CREB3L2	7471	520	*
NM_006875.3	PIM2	2234	311	
NM_001302826.1	CYB5R	1713	276	
NM_003929.2	RAB7L1	3324	203	
NM_174908.3	CCDC50	8421	306	
NM_015361.3	R3HDM1	4722	1099	
NM_017706.4	WDR55	2580	383	
NM_020701.3	ISY1	3778	285	
NM_014607.3	UBXN4	4018	508	
NM_030961.2	TRIM56	4723	755	
NM_000902.3	MME	5643	750	
NM_001284275.1	SERPINA9	1661	435	*
NM_024701.3	ASB13	2736	278	
NM_018717.4	MAML3	7086	1138	
NM_002221.3	ITPKB	6162	946	
NM_001080416.3	MYBL1	5192	752	
NM_004230.3	S1PR2	3589	353	
NM_020529.2	NFKBIA	1579	371	
NM_139276.2	STAT3	4978	770	
NM_000314.6	PTEN	8718	403	*
NM_006218.2	РКІЗСА	3724	1068	

26-gene-panel for **COO & key-genes** Haematologica, 2020

50-gene-panel for microenvironment Ann Oncol, 2018

MFrelated

DC-

related

genes

CD4+ T

cell-

related

genes

SULF1 Transforming growth factor beta induced Activated leukocyte cell adhesion molecule ALCAM AMICAL CD300 molecule-like family member F CD300LF Collagen, type IV, alpha 2 COL4A2 Immunoglobulin superfamily, member 6 IGSF6 **MyoD Family Inhibitor Domain Containing** MDFIC Purinergic receptor P2Y, G-protein coupled, 14 P2RY14 Solute carrier family 29 (nucleoside transporters), membe SLC29A3 Solute carrier family 2 (facilitated glucose transporter), SLC2A3 CTSZ Henaran Sulfate-Glucosamine 3-Sulfotransferase 3A1 Peptidase, Mitochondrial Processing Beta Subunit PMPCB

SMAD Family Member 1

RAB27A, Member RAS Oncogene Family

Actin, alpha 2, smooth muscle

AE binding protein 1

Collagen type I alpha 1

Collagen type III alpha 1

Collagen type IV alpha 1

Collagen type V alpha 2

Collagen type VI alpha 3

Early growth response 1

Collagen triple helix repeat containing 1

Biglycan

Cathepsin K

Fibronectin 1

**GENES** 

Follistatin like 1 Glycoprotein nmb Laminin subunit beta 1 Matrix metallopeptidase 2 Mannose receptor, C type 2 Matrix-Remodelling Associated 5 Procollagen C-endopeptidase enhancer Procollagen-lysine, 2-oxoglutarate 5-dioxygenase 2 Periostin, osteoblast specific factor Secreted protein acidic and cysteine rich Adhesion molecule, interacts with CXADR antigen 1

IMMUNE

# A 3-gene signature based on MYC, BCL-2 and NFKBIA improves risk stratification in diffuse large B-cell lymphoma

by Enrico Derenzini, Saveria Mazzara, Federica Melle, Giovanna Motta, Marco Fabbri, Riccardo Bruna, Claudio Agostinelli, Alessandra Cesano, Chiara Antonia Corsini, Ning Chen, Simona Righi, Elena Sabattini, Annalisa Chiappella, Angelica Calleri, Stefano Fiori, Valentina Tabanelli, Antonello Cabras, Giancarlo Pruneri, Umberto Vitolo, Alessandro Massimo Gianni, Alessandro Rambaldi, Paolo Corradini, Pier Luigi Zinzani, Corrado Tarella, and Stefano Pileri

Haematologica 2020 [Epub ahead of print]

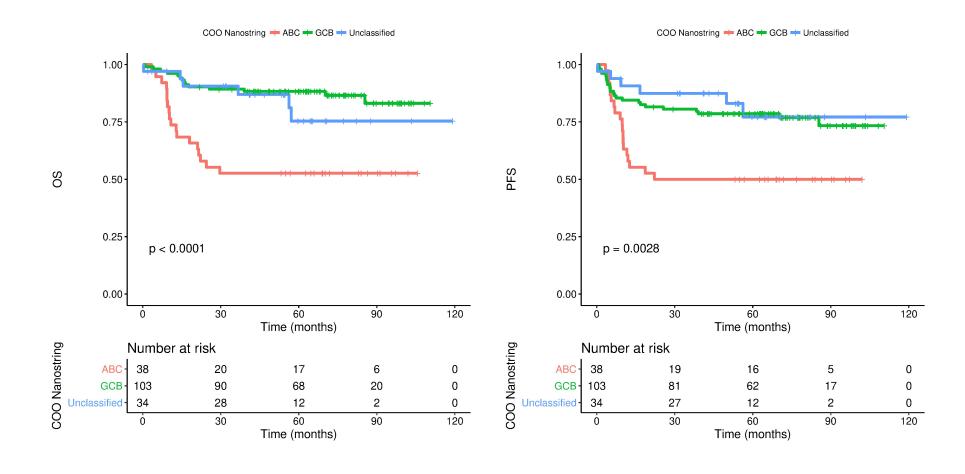
## 224 DLBCL patients FFPE specimens DLCL04 (n = 130)R-HDS(n = 94)NanoString insufficient mRNA n = 17 207 DLBCL patients IHC non-NOS n = 21 186 DLBCL patients DLCL04 (n = 99)R-HDS (n = 87)

In both trials, only patients staged III-IV were enrolled, all treated with R-CHOP or R-CHOP-like therapies followed or not by Auto-SCT.

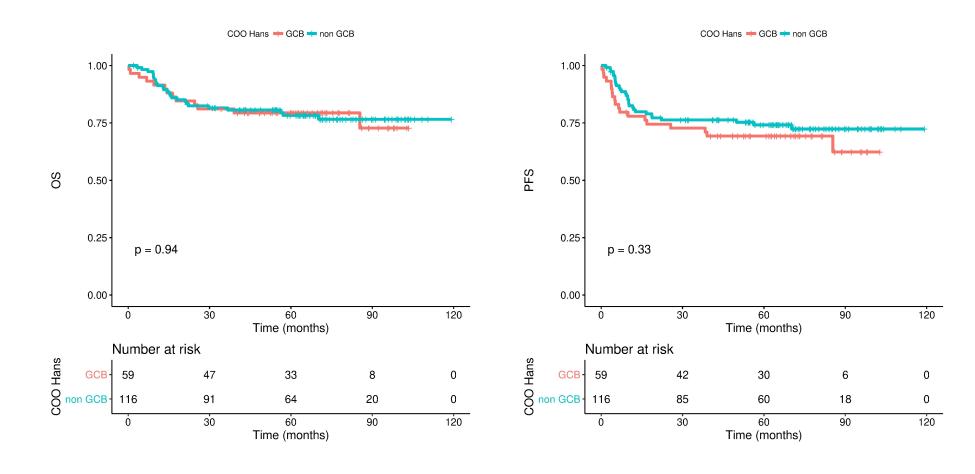
The mean age was 52 yr.s (18 – 65)

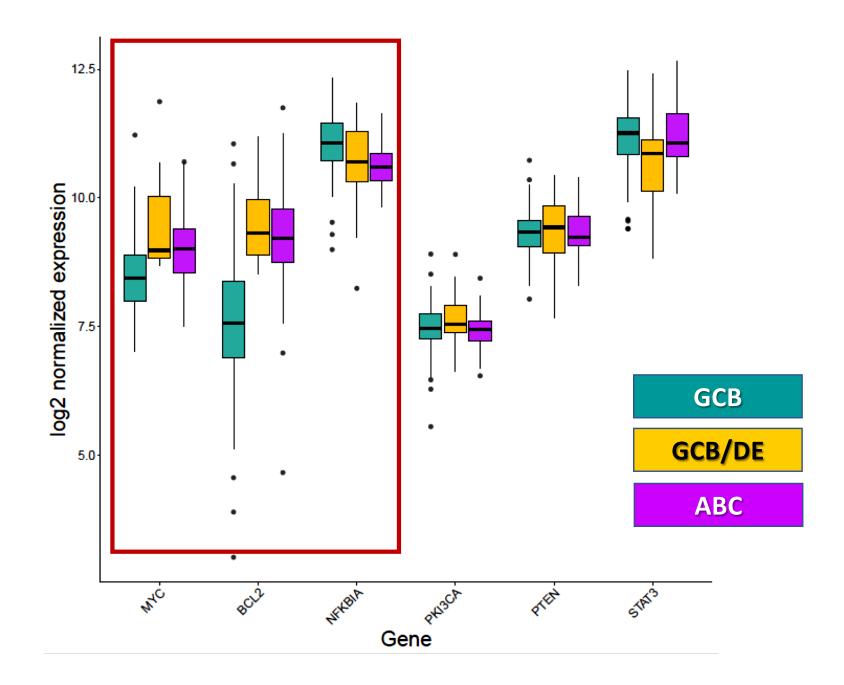
All the cases were studied by immunohistochemistry, targeted GEP and FISH (BCL2, MYC and BCL6).

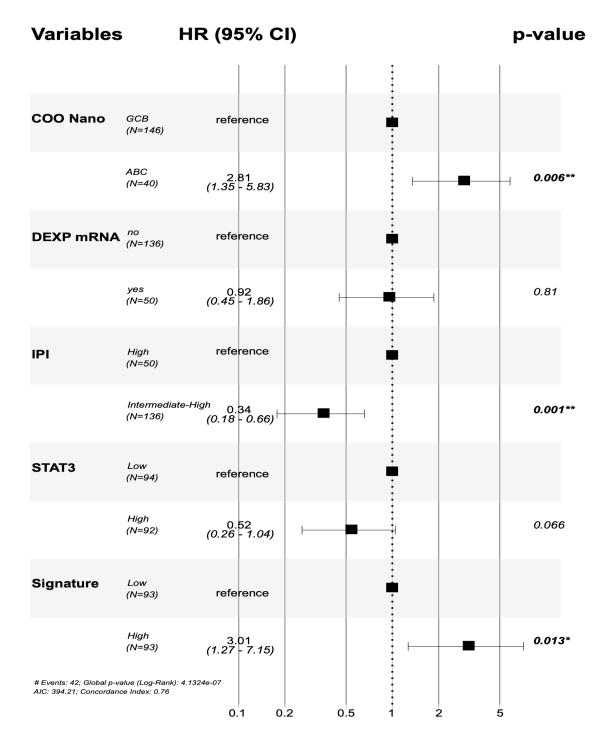
## **COO** according to targeted **GEP**

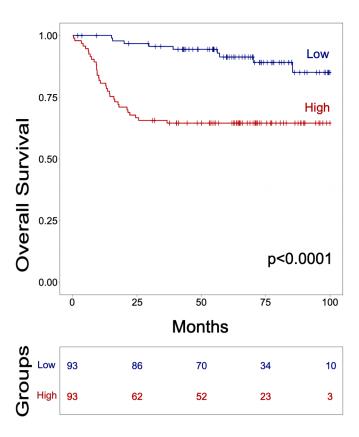


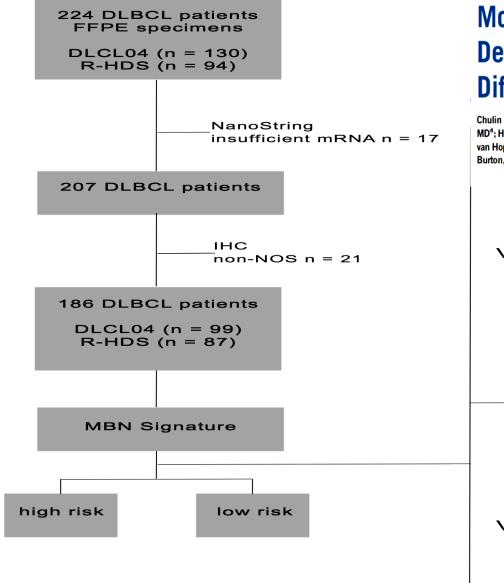
## **COO** according to Hans' classifier











### Molecular High-Grade B-Cell Lymphoma: Defining a Poor-Risk Group That Requires Different Approaches to Therapy

Chulin Sha, PhD<sup>1</sup>; Sharon Barrans, PhD<sup>2</sup>; Francesco Cucco, PhD<sup>3</sup>; Michael A. Bentley, DPhil<sup>1</sup>; Matthew A. Care, PhD<sup>1</sup>; Thomas Cummin, MD<sup>4</sup>; Hannah Kennedy, PhD<sup>3</sup>; Joe S. Thompson, MPhil<sup>3</sup>; Rahman Uddin, MSc<sup>1</sup>; Lisa Worrillow, PhD<sup>2</sup>; Rebecca Chalkley, MPhil<sup>2</sup>; Moniek van Hoppe, MSc<sup>2</sup>; Sophia Ahmed, PhD<sup>1</sup>; Tom Maishman, PhD<sup>4</sup>; Josh Caddy, BSc<sup>4</sup>; Anna Schuh, MD<sup>5</sup>; Christoph Mamot, MD<sup>6</sup>; Catherine Burton, MD<sup>2</sup>; Reuben Tooze, PhD<sup>1</sup>; Andrew Davies, PhD<sup>4</sup>; Ming-Qing Du, PhD<sup>3</sup>; Peter W.M. Johnson, MD<sup>4</sup>; and David R. Westhead, DPhil<sup>1</sup>



420 DLBCL patients
(FF specimens)

Therapy
CHOP treated n = 181

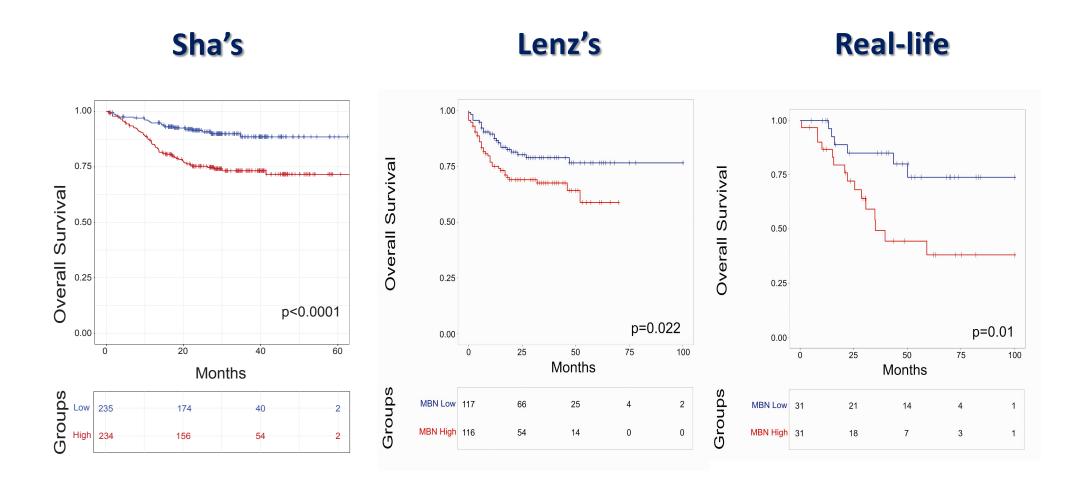
233 DLBCL patients

high risk low risk

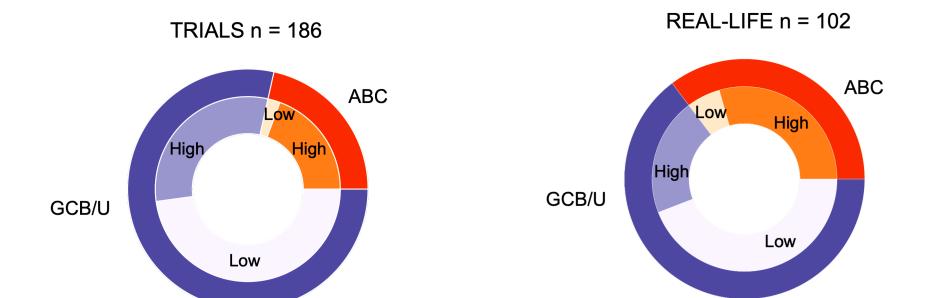
Validation Cohort (Real-life patients)

102 DLBCL patients
(FFPE specimens)

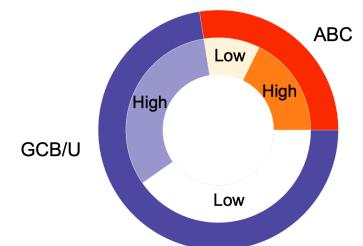
high risk low risk

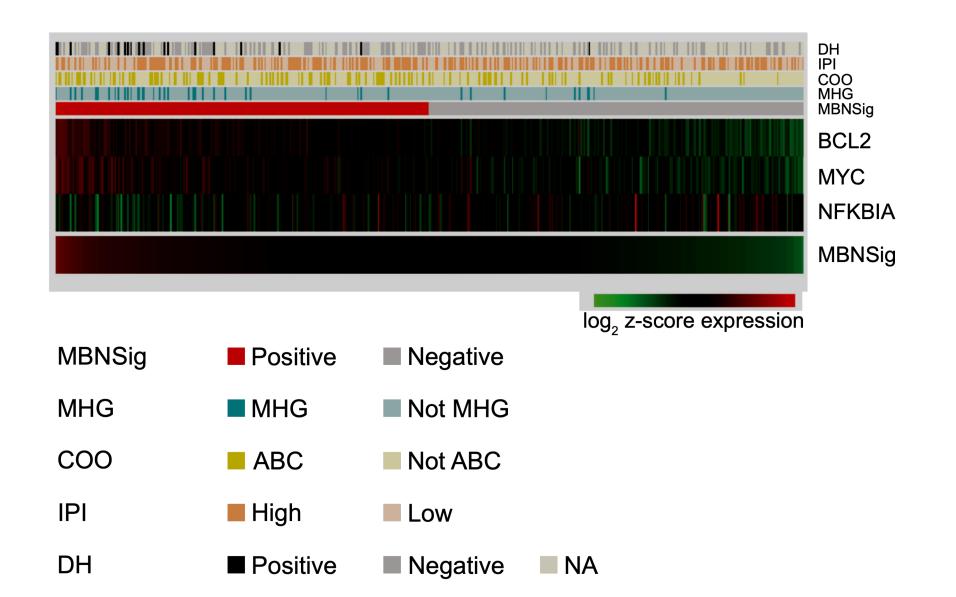




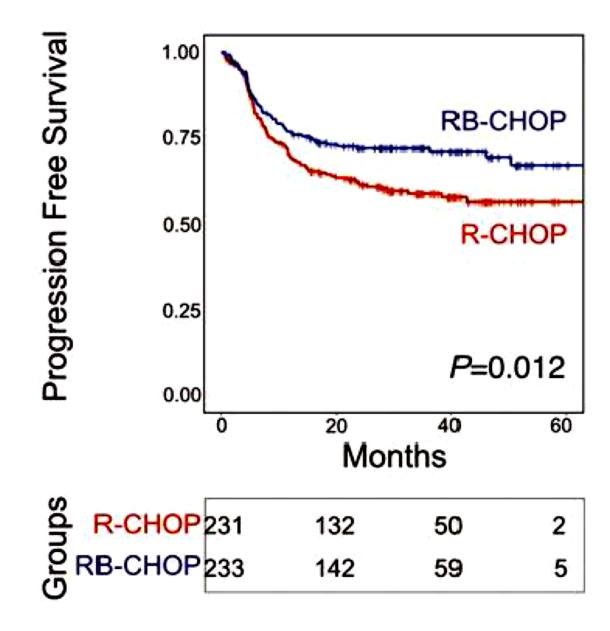








Patients from Sha's series with high MBN



## **Conclusions**

- The MBN signature does implement the cell of origin (COO) determination.
- A higher risk group (enriched in genetic aberrations) can be identified among GCB/U and ABC DLBCLs.
- Potential therapeutic implications.
- Applicable to all patients at low cost!!!

## The NEW ENGLAND JOURNAL of MEDICINE

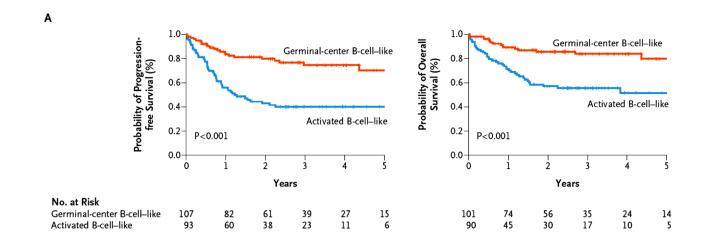
**ESTABLISHED IN 1812** 

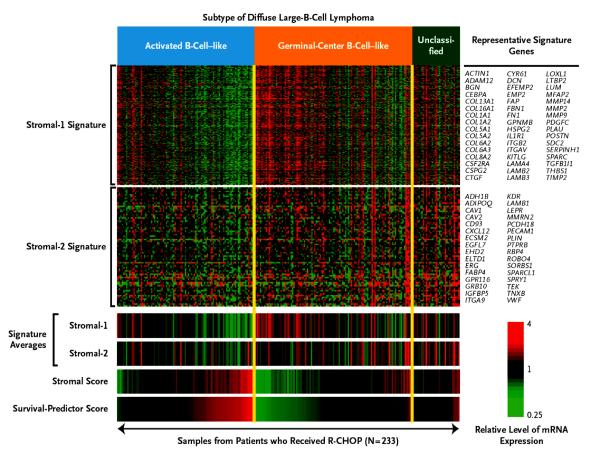
**NOVEMBER 27, 2008** 

VOL. 359 NO. 22

### Stromal Gene Signatures in Large-B-Cell Lymphomas

G. Lenz, M.D., G. Wright, Ph.D., S.S. Dave, M.D., W. Xiao, Ph.D., J. Powell, M.S., H. Zhao, M.S., W. Xu, M.S., B. Tan, M.D., N. Goldschmidt, M.D., J. Iqbal, Ph.D., J. Vose, M.D., M. Bast, B.S., K. Fu, M.D., Ph.D., D.D. Weisenburger, M.D., T.C. Greiner, M.D., J.O. Armitage, M.D., A. Kyle, Ph.D., L. May, Ph.D., R.D. Gascoyne, M.D., J.M. Connors, M.D., G. Troen, Ph.D., H. Holte, M.D., Ph.D., S. Kvaloy, M.D., Ph.D., D. Dierickx, M.D., G. Verhoef, M.D., J. Delabie, M.D., E.B. Smeland, M.D., Ph.D., P. Jares, Ph.D., A. Martinez, M.D., A. Lopez-Guillermo, M.D., E. Montserrat, M.D., E. Campo, M.D., R.M. Braziel, M.D., T.P. Miller, M.D., L.M. Rimsza, M.D., J.R. Cook, M.D., B. Pohlman, M.D., J. Sweetenham, M.D., R.R. Tubbs, M.D., R.I. Fisher, M.D., E. Hartmann, M.D., A. Rosenwald, M.D., G. Ott, M.D., H.-K. Muller-Hermelink, M.D., D. Wrench, M.D., T.A. Lister, M.D., E.S. Jaffe, M.D., W.H. Wilson, M.D., Ph.D., W.C. Chan, M.D., and L.M. Staudt, M.D., Ph.D., for the Lymphoma/Leukemia Molecular Profiling Project





Stromal-1:
Extra-cellular matrix
deposition +
Macrophage
infiltration

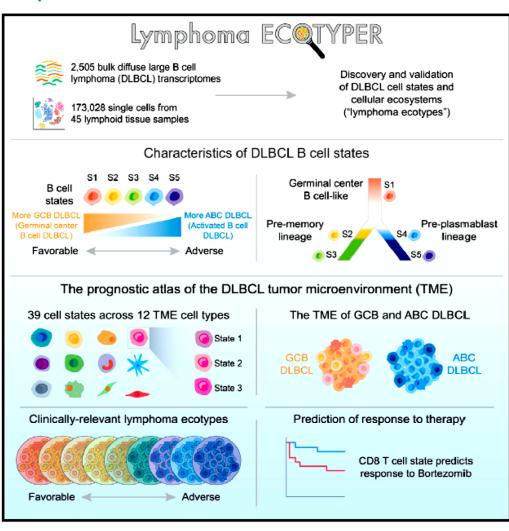
Stromal-2:
Angiogenic genes

→
Micro-vessel
density

### **Cancer Cell**

## The landscape of tumor cell states and ecosystems in diffuse large B cell lymphoma

### **Graphical abstract**



### **Authors**

Chloé B. Steen, Bogdan A. Luca, Mohammad S. Esfahani, ..., Andrew J. Gentles, Aaron M. Newman, Ash A. Alizadeh

### Correspondence

amnewman@stanford.edu (A.M.N.), arasha@stanford.edu (A.A.A.)

### In brief

Steen et al. implement EcoTyper, a machine-learning approach for dissecting cellular heterogeneity in the most common blood cancer, diffuse large B cell lymphoma (DLBCL). Forty-four cell states spanning malignant cells and the microenvironment are defined, uncovering a rich landscape of cellular ecosystems that extend beyond traditional DLBCL classifications, revealing new opportunities for therapy selection.

### ACCEPTED MANUSCRIPT

## Dissection of DLBCL Microenvironment Provides a Gene Expression-Based Predictor of Survival Applicable to Formalin-Fixed Paraffin-Embedded Tissue

S Ciavarella, M C Vegliante, M Fabbri, S De Summa, F Melle, G Motta, V De Iuliis, G Opinto, A Enjuanes, S Rega, A Gulino, C Agostinelli, A Scattone, S Tommasi, A Mangia, F Mele, G Simone, A F Zito, G Ingravallo, U Vitolo, A Chiappella, C Tarella, A M Gianni, A Rambaldi, P L Zinzani, B Casadei, E Derenzini, G Loseto, A Pileri, V Tabanelli, S Fiori, A Rivas-Delgado, A López-Guillermo, T Venesio, A Sapino, E Campo, C Tripodo, A Guarini, S A Pileri 

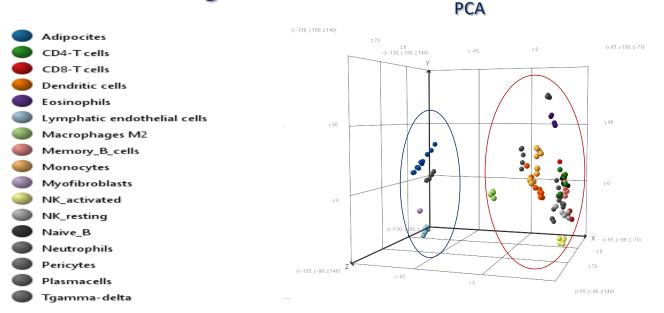
■

Annals of Oncology, mdy450, https://doi.org/10.1093/annonc/mdy450

Published: 11 October 2018

## CIBERSORT analysis and selection of prognostic genes

A customized signature including 1,028 genes was generated to distinguish 17 cell types of both stromal and immune origin.



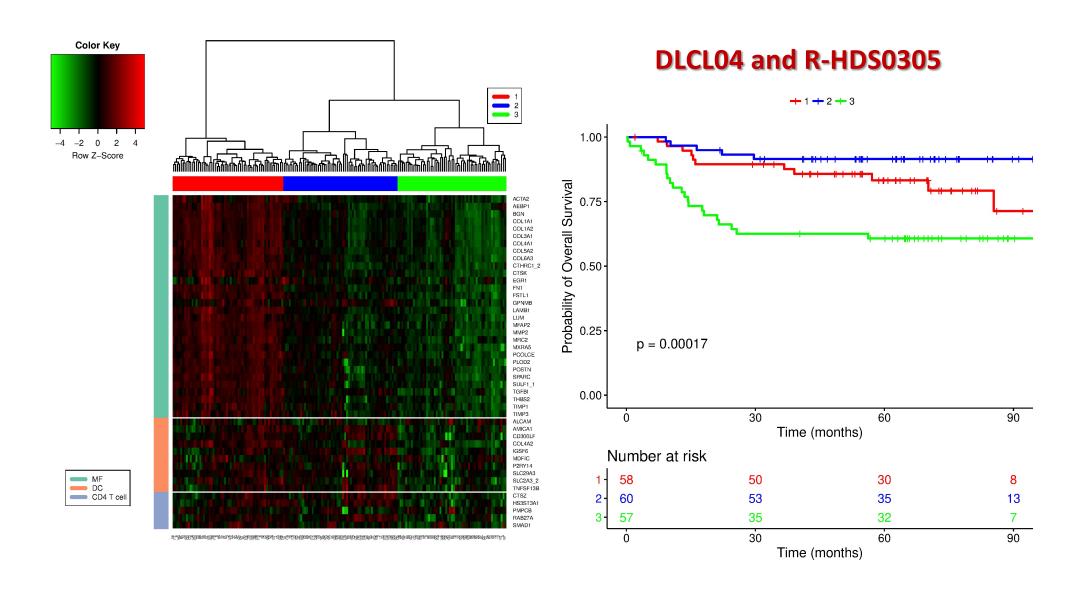
MFrelated genes

DCrelated genes

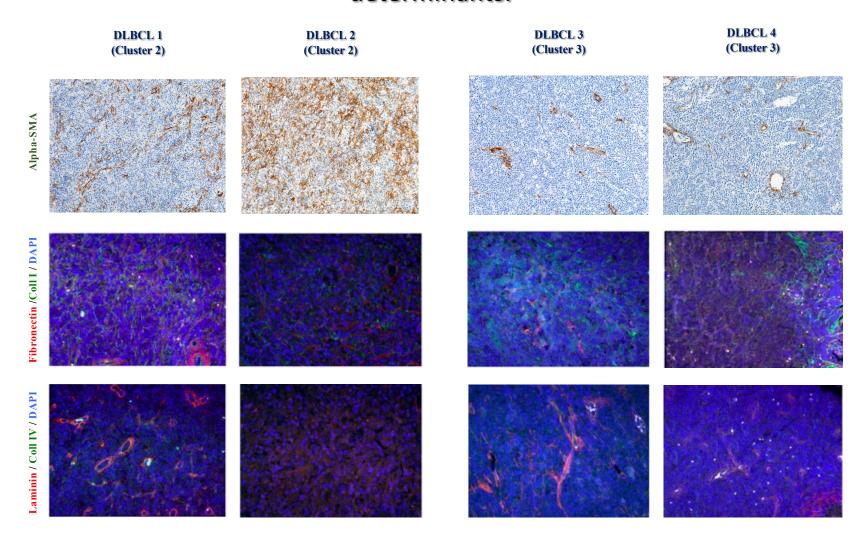
CD4+ T cellrelated genes

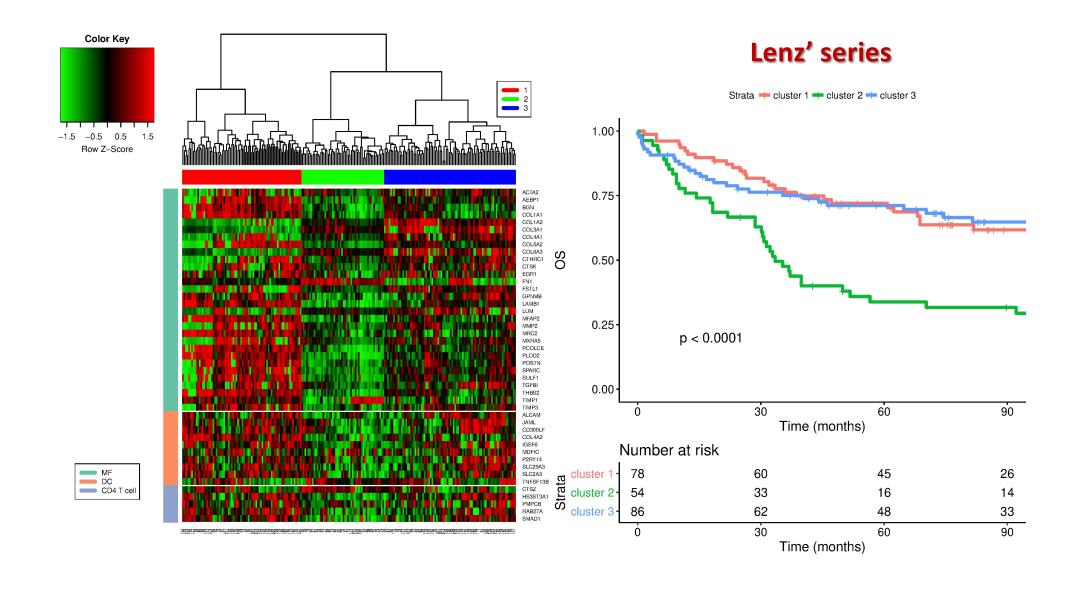
SMAD1

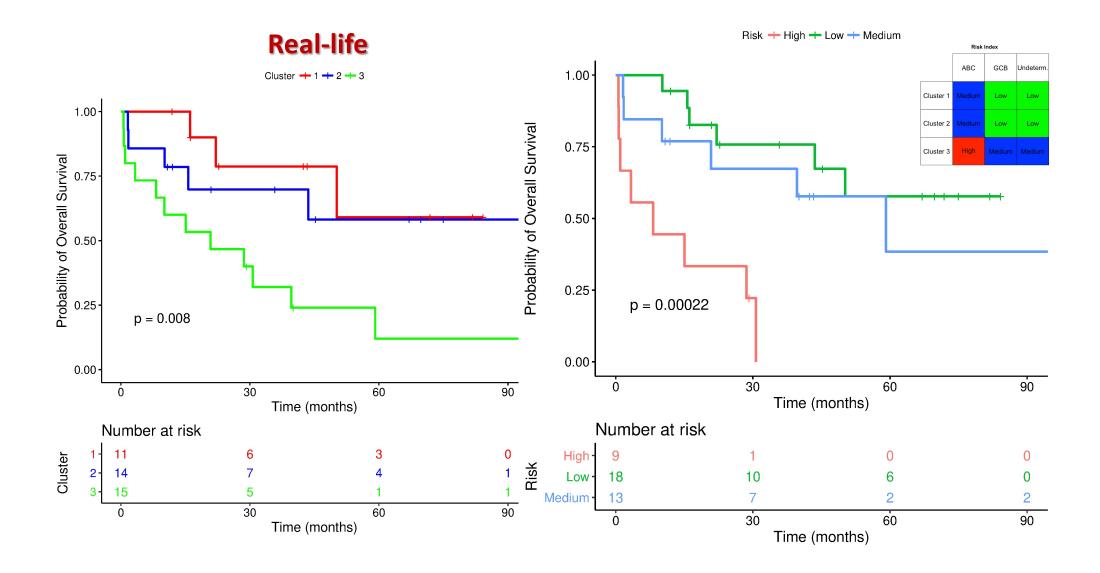
Actin, alpha 2, smooth muscle AEBP1 AE binding protein 1 Biglycan COL1A1 Collagen type I alpha 1 Collagen type I alpha 2 Collagen type III alpha 1 Collagen type IV alpha 1 Collagen type V alpha 2 Collagen type VI alpha 3 Collagen triple helix repeat containing 1 CTSK Cathensin K EGR1 Early growth response Fibronectin 1 FSTL1 Follistatin like 1 **GPNMB** Glycoprotein nmb LAMB1 Laminin subunit beta 1 LUM MFAP2 MMP2 Matrix metallopeptidase 2 MXRA5 Matrix-Remodelling Associated 5 Procollagen C-endopeptidase enhancer Procollagen-lysine, 2-oxoglutarate 5-dioxygenase 2 PLOD2 Periostin, osteoblast specific factor Secreted protein acidic and cysteine rich SPARC SULE1 Transforming growth factor beta induced TGFBI Activated leukocyte cell adhesion molecule ALCAM Adhesion molecule, interacts with CXADR antigen 1 AMICA1 CD300LF CD300 molecule-like family member F Collagen, type IV, alpha 2 COL4A2 Immunoglobulin superfamily, member 6 IGSF6 MyoD Family Inhibitor Domain Containing MDEIC Purinergic receptor P2Y, G-protein coupled, 14 P2RY14 Solute carrier family 29 (nucleoside transporters), member 3: SLC29A3 Solute carrier family 2 (facilitated glucose transporter), SLC2A3 Cathepsin Z CTSZ Heparan Sulfate-Glucosamine 3-Sulfotransferase 3A1 Peptidase, Mitochondrial Processing Beta Subunit RAB27A, Member RAS Oncogene Family SMAD Family Member 1



By *in situ* immunostaining we analyzed the expression of ECM proteins encoded by four of the fronting genes of the MF signature, namely Fibronectin, Collagen-I, Laminin, and Collagen-IV. However, the expression variability of these proteins does not support the use of immunohistochemistry as a reliable assay to provide insight on the prognostic gene expression patterns of DLBCL microenvironment determinants.





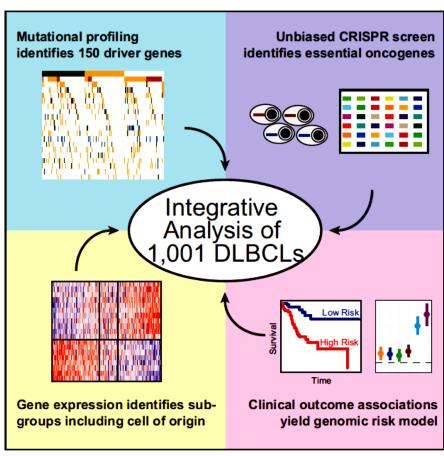


# Next generation sequencing



## **Genetic and Functional Drivers of Diffuse Large B Cell Lymphoma**

### **Graphical Abstract**



### **Authors**

Anupama Reddy, Jenny Zhang, Nicholas S. Davis, ..., Jyotishka Datta, David B. Dunson, Sandeep S. Dave

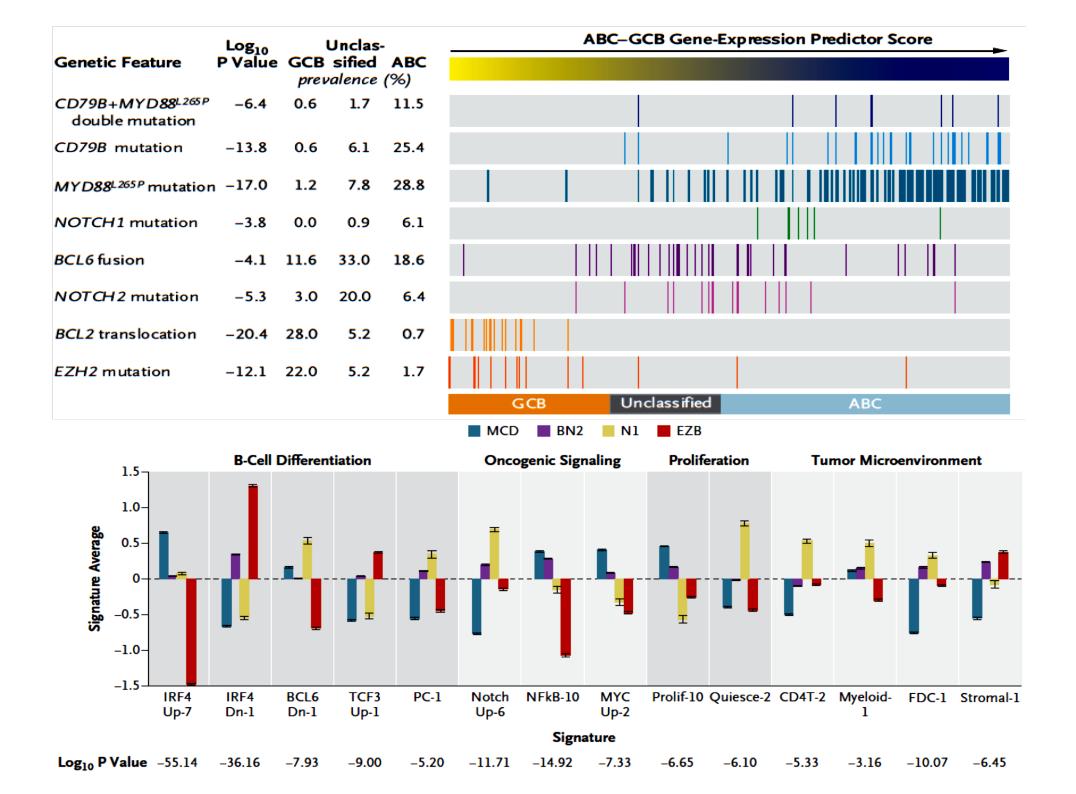
### Correspondence

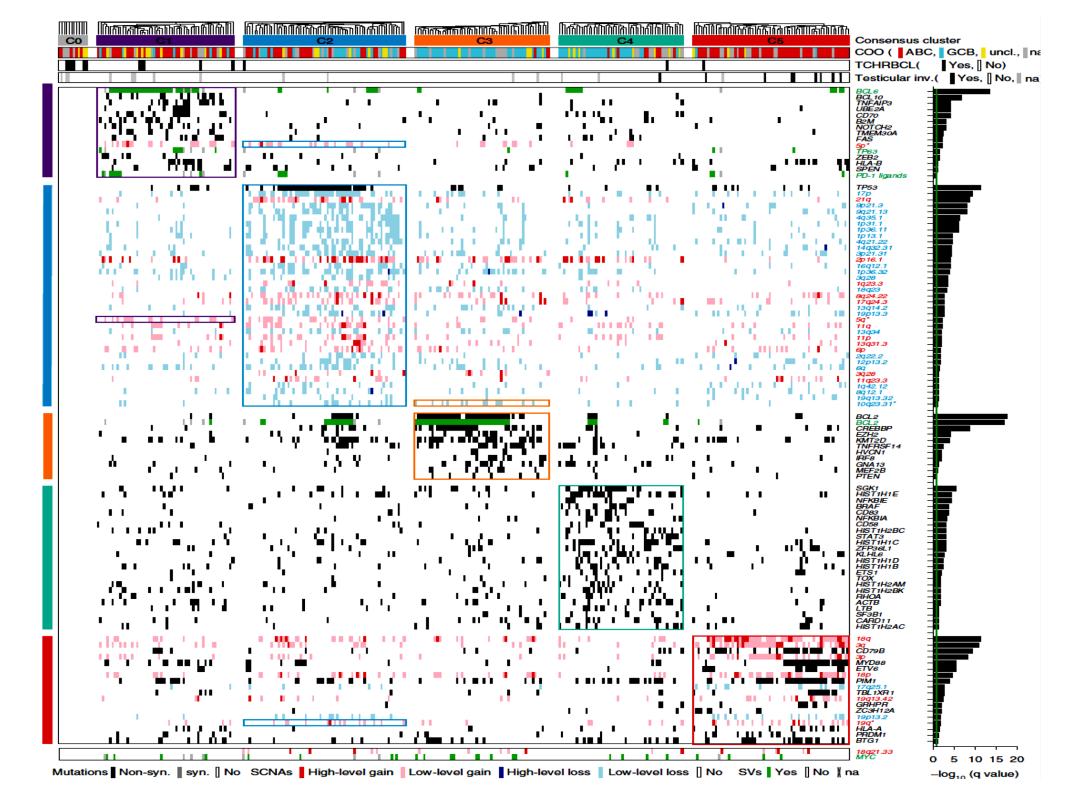
sandeep.dave@duke.edu

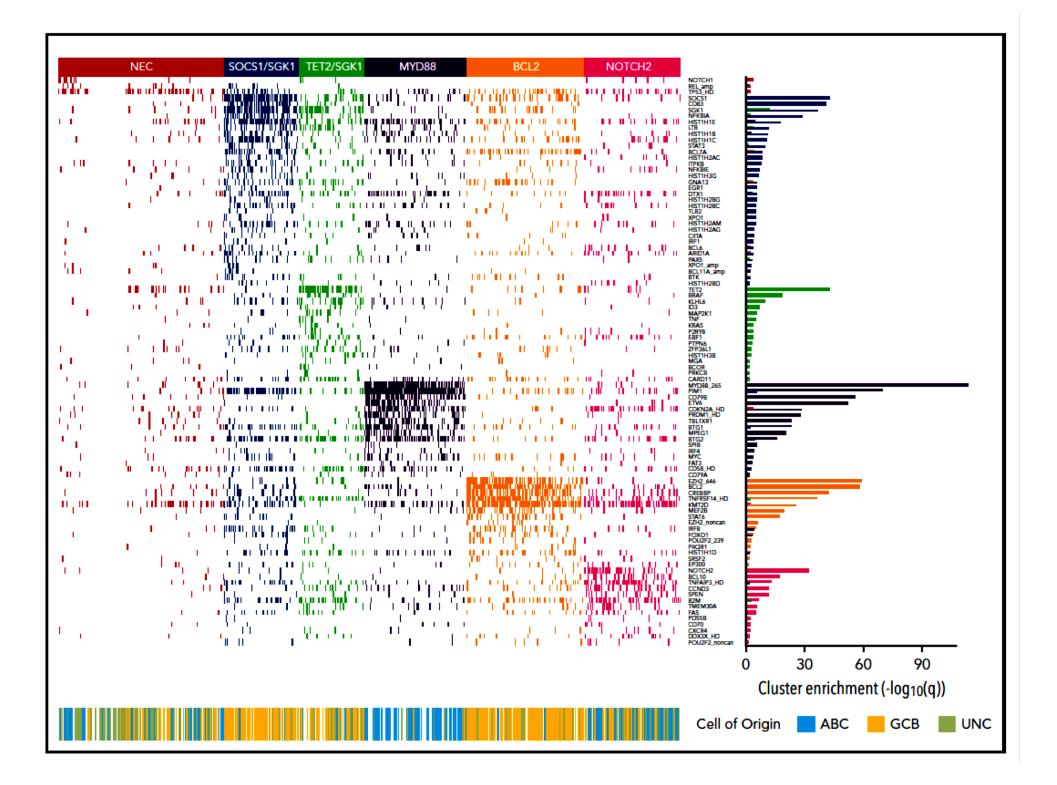
### In Brief

An integrative analysis in 1,001 newly diagnosed DLBCL patients identifies 150 genetic drivers with functional characterization using an unbiased CRISPR screen in DLBCL cell lines and connects with clinical outcome.

Cell 171, 481-494, October 5, 2017



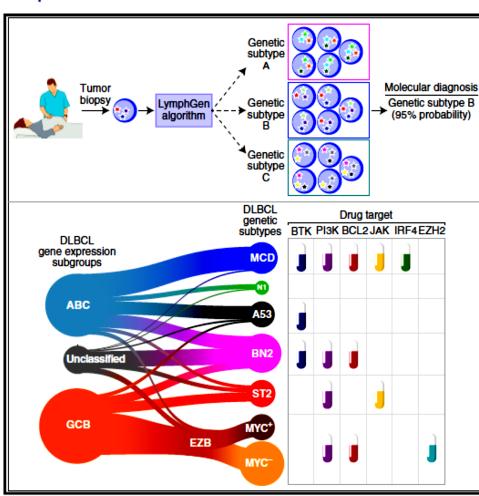




### **Cancer Cell**

# A Probabilistic Classification Tool for Genetic Subtypes of Diffuse Large B Cell Lymphoma with Therapeutic Implications

#### **Graphical Abstract**



#### **Authors**

George W. Wright, Da Wei Huang, James D. Phelan, ..., Wyndham H. Wilson, David W. Scott, Louis M. Staudt

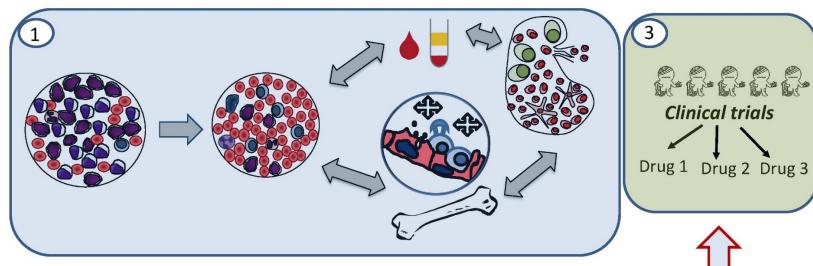
#### Correspondence

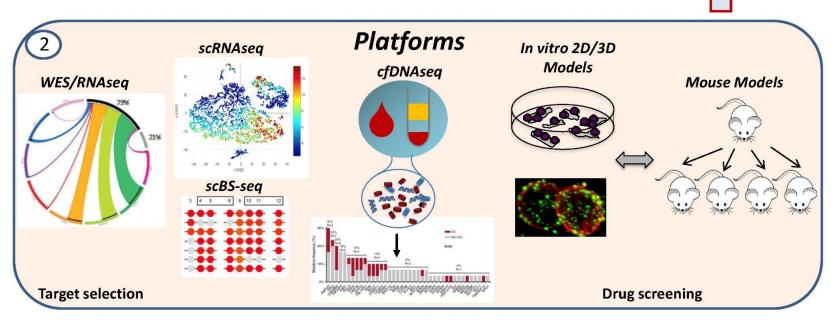
Istaudt@mail.nih.gov

#### In Brief

Wright et al. identify seven genetic subtypes of diffuse large B cell lymphoma (DLBCL) with distinct outcomes and therapeutic vulnerabilities. The LymphGen probabilistic classification tool that can classify a DLBCL biopsy into the genetic subtypes is developed, which could be used for precision medicine trials.

#### Diagnosis Resistance Dissemination

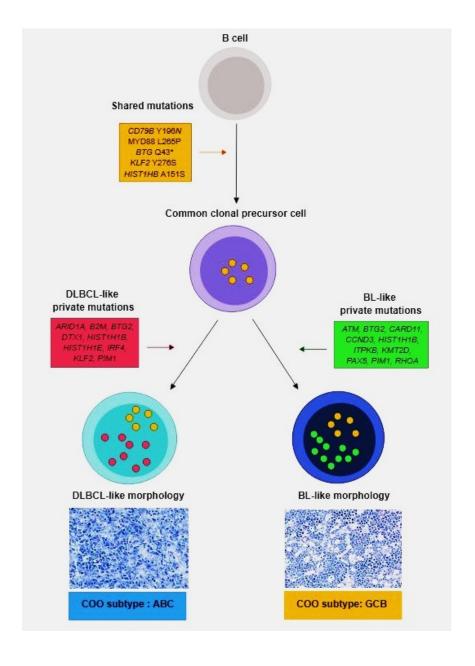




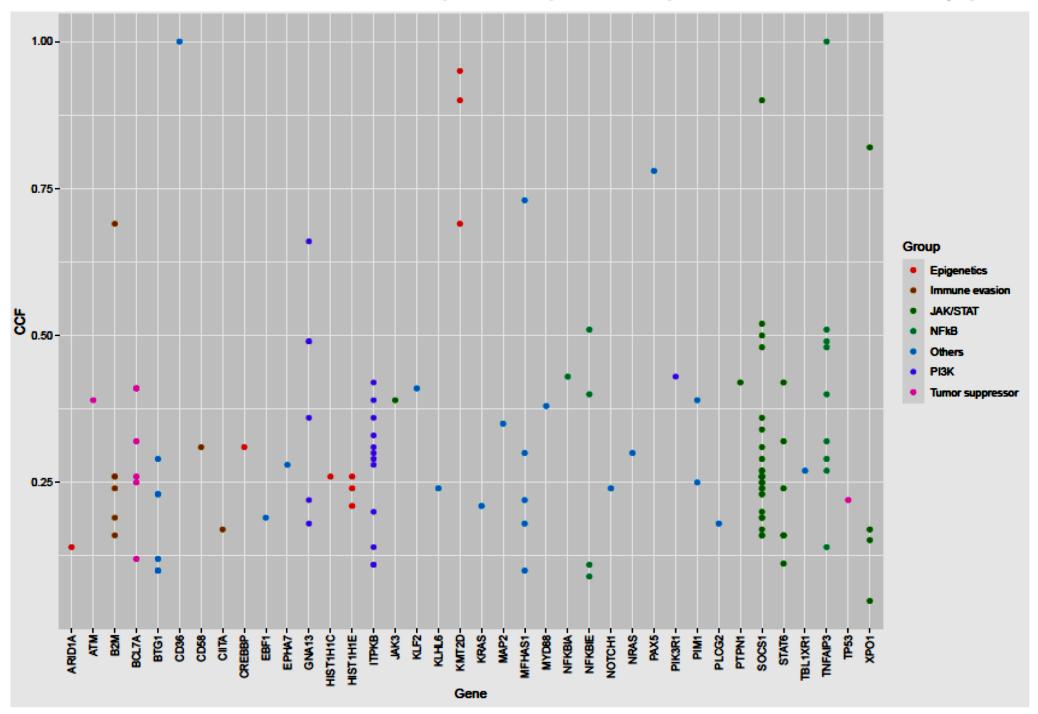
# Evolutionary crossroads: morphological heterogeneity reflects divergent intra-clonal evolution in a case of high-grade B-cell lymphoma

by Valentina Tabanelli, Federica Melle, Giovanna Motta, Saveria Mazzara, Marco Fabbri, Chiara Corsini, Elvira Gerbino, Angelica Calleri, Maria Rosaria Sapienza, Ignazio Abbene, Viviana Stufano, Massimo Barberis, and Stefano A. Pileri

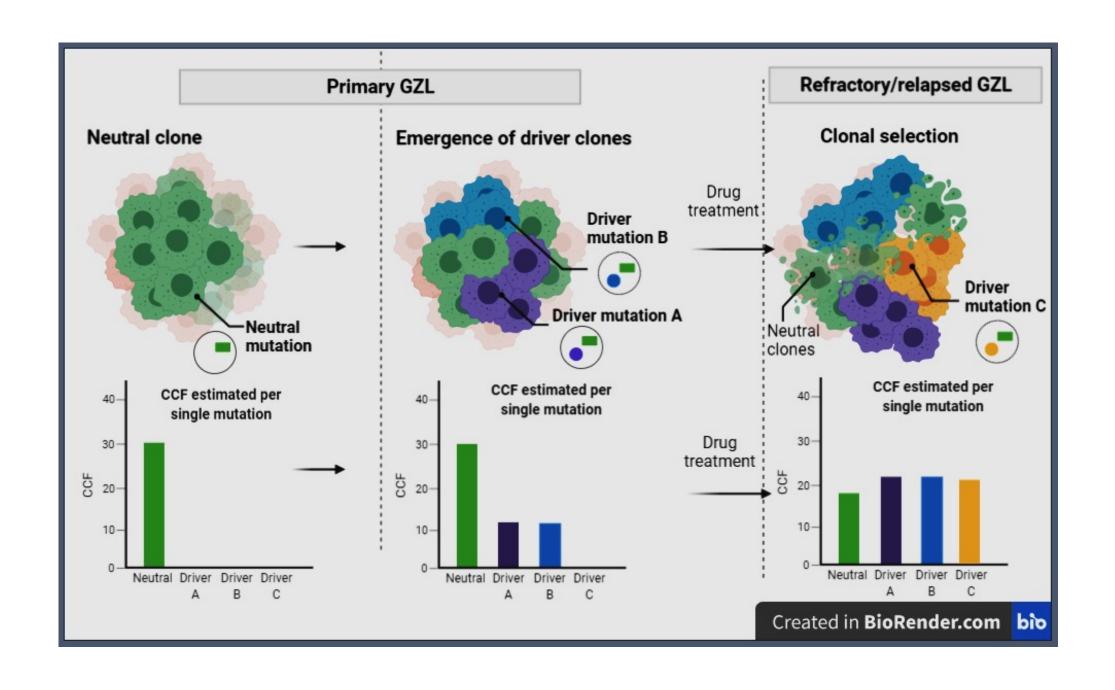
Haematologica 2020 [Epub ahead of print]

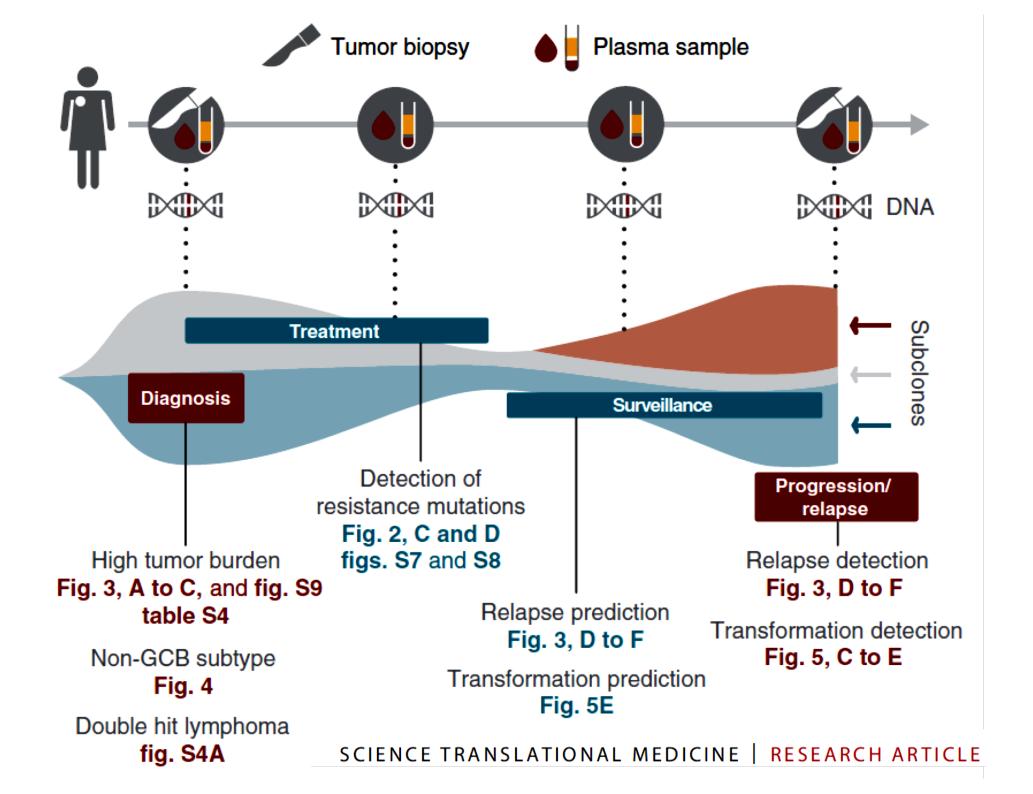


## 11 mediastinal GZLs (3 R/R) + 30 (EAHP Workshop)



# Relapses due to subclonal selection?







Journal of The Ferrata Storti Foundation

# Cell-free DNA sequencing as a potential screening tool for phase I targeted treatment in refractory/relapse diffuse large B cell lymphoma

by Cyril Quivoron, Anthony Tarabay, Jean-Marie Michot, Arnaud Pagès, Hélène Lecourt, Anne Aupérin, Alina Danu, Julien Lazarovici, Julien Rossignol, David Ghez, Peggy Dartigues, Véronique Vergé, Christophe Massard, Valérie Camara-Clayette, Vincent Ribrag, and Clémentine Sarkozy

Received: December 15, 2021. Accepted: March 11, 2022.

